



This is an official  
**CDC Health Advisory**

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## **Evaluating Patients for Possible Ebola Virus Disease: Recommendations for Healthcare Personnel and Health Officials**

### **Summary**

*The first case of Ebola Virus Disease (Ebola) diagnosed in the United States was reported to CDC by Dallas County Health and Human Services on September 28, 2014, and laboratory-confirmed by CDC and the Texas Laboratory Response Network (LRN) laboratory on September 30. The patient departed Monrovia, Liberia, on September 19, and arrived in Dallas, Texas, on September 20. The patient was asymptomatic during travel and upon his arrival in the United States; he fell ill on September 24 and sought medical care at Texas Health Presbyterian Hospital of Dallas on September 26. He was treated and released. On September 28, he returned to the same hospital, and was admitted for treatment.*

### **Background**

The first known case of Ebola with illness onset and laboratory confirmation in the United States occurred in Dallas, Texas, on September 2014, in a traveler from Liberia. The West African countries of Liberia, Sierra Leone, and Guinea are experiencing the largest Ebola epidemic in history. From March 24, 2014, through September 23, 2014, there have been 6,574 total cases (3,626 were laboratory-confirmed) and 3,091 total deaths reported in Africa. Ebola is a rare and deadly disease caused by infection with one of four viruses (Ebolavirus genus) that cause disease in humans. Ebola infection is associated with fever of greater than 38.6°C or 101.5°F, and additional symptoms such as severe headache, muscle pain, vomiting, diarrhea, abdominal pain, or unexplained hemorrhage. Ebola is spread through direct contact (through broken skin or mucous membranes) with blood or body fluids (including but not limited to urine, saliva, feces, vomit, sweat, breast milk, and semen) of a person who is sick with Ebola or contact with objects (such as needles and syringes) that have been contaminated with these fluids. Ebola is not spread through the air or water. The main source for spread is human-to-human transmission. Avoiding contact with infected persons (as well as potentially infected corpses) and their blood and body fluids is of paramount importance. Persons are not contagious before they are symptomatic. The incubation period (the time from exposure until onset of symptoms) is typically 8-10 days, but can range from 2-21 days. Additional information is available at <http://www.cdc.gov/vhf/ebola/index.html>.

### **Recommendations**

Early recognition is critical to controlling the spread of Ebola virus. Consequently, healthcare personnel should elicit the patient's travel history and consider the possibility of Ebola in patients who present with fever, myalgia, severe headache, abdominal pain, vomiting, diarrhea, or unexplained bleeding or bruising. Should the patient report a history of recent travel to one of the affected West African countries (Liberia, Sierra Leone, and Guinea) and exhibit such symptoms, immediate action should be taken. The Ebola algorithm for the evaluation of a returned traveler and the checklist for evaluation of a patient being evaluated for Ebola are available at <http://www.cdc.gov/vhf/ebola/pdf/ebola-algorithm.pdf> and <http://www.cdc.gov/vhf/ebola/pdf/checklist-patients-evaluated-us-evd.pdf>.

Patients in whom a diagnosis of Ebola is being considered should be isolated in a single room (with a private bathroom), and healthcare personnel should follow standard, contact, and droplet precautions, including the use of appropriate personal protective equipment (PPE). Infection control personnel and the local health department should be immediately contacted for consultation.

The following guidance documents provide additional information about clinical presentation and clinical course of Ebola virus disease, infection control, and patient management:

- Guidelines for clinicians in U.S. healthcare settings are available at <http://www.cdc.gov/vhf/ebola/hcp/clinician-information-us-healthcare-settings.html>.
- Guidelines for infection prevention control for hospitalized patients with known or suspected Ebola in U.S. hospitals are available at <http://www.cdc.gov/vhf/ebola/hcp/infection-prevention-and-control-recommendations.html>
- Guidelines for safe management of patients with Ebola in U.S. hospitals are at <http://www.cdc.gov/vhf/ebola/hcp/patient-management-us-hospitals.html>.

The case definitions for persons under investigation (PUI) for Ebola, probable cases, and confirmed cases as well as classification of exposure risk levels are at <http://www.cdc.gov/vhf/ebola/hcp/case-definition.html>.

Persons at highest risk of developing infection are:

- those who have had direct contact with the blood and body fluids of an individual diagnosed with Ebola – this includes any person who provided care for an Ebola patient, such as a healthcare provider or family member not adhering to recommended infection control precautions (i.e., not wearing recommended PPE
- those who have had close physical contact with an individual diagnosed with Ebola
- those who lived with or visited the Ebola-diagnosed patient while he or she was ill.

Persons who have been exposed, but who are asymptomatic, should be instructed to monitor their health for the development of fever or symptoms for 21 days after the last exposure. Guidelines for monitoring and movement of persons who have been exposed to Ebola are available at <http://www.cdc.gov/vhf/ebola/hcp/monitoring-and-movement-of-persons-with-exposure.html>.

Diagnostic tests are available for detection of Ebola at LRN laboratories as well as CDC. Consultation with CDC is required before shipping specimens to CDC. Information about diagnostic testing for Ebola can be found at <http://www.cdc.gov/vhf/ebola/hcp/interim-guidance-specimen-collection-submission-patients-suspected-infection-ebola.html>. DHEC asks that healthcare providers contact DHEC and DHEC will consult with the CDC to determine the proper requirements for testing and specimen shipment.

Healthcare personnel in the United States should immediately contact their state or local health department regarding any person being evaluated for Ebola if the medical evaluation suggests that diagnostic testing may be indicated. If there is a high index of suspicion, U.S. health departments should immediately report any probable cases or persons under investigation (PUI) (<http://www.cdc.gov/vhf/ebola/hcp/case-definition.html>) to CDC's Emergency Operations Center at 770-488-7100.

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*The Centers for Disease Control and Prevention (CDC) protects people's health and safety by preventing and controlling diseases and injuries; enhances health decisions by providing credible information on critical health issues; and promotes healthy living through strong partnerships with local, national, and international organizations.*

## DHEC contact information for reportable diseases and reporting requirements

Reporting of Ebola Virus Disease is consistent with South Carolina Law requiring the reporting of diseases and conditions to your state or local public health department. (State Law # 44-29-10 and Regulation # 61-20) as per the DHEC 2014 List of Reportable Conditions available at:

<http://www.scdhec.gov/Library/CR-009025.pdf>

Federal HIPAA legislation allows disclosure of protected health information, without consent of the individual, to public health authorities to collect and receive such information for the purpose of preventing or controlling disease. (HIPAA 45 CFR §164.512).

## Regional Public Health Offices – 2014

**Mail or call reports to the Epidemiology Office in each Public Health Region.**

### **LOW COUNTRY PUBLIC HEALTH REGION**

#### **Berkeley, Charleston, Dorchester**

4050 Bridge View Drive, Suite 600  
N. Charleston, SC 29405  
Phone: (843) 953-0043  
Fax: (843) 953-0051  
Nights / Weekends: (843) 441-1091

#### **Beaufort, Colleton, Hampton, Jasper**

219 S. Lemacks Street  
Walterboro, SC 29488  
Phone: (843) 549-1516  
Fax: (843) 549-6845  
Nights / Weekends: (843) 441-1091

#### **Allendale, Bamberg, Calhoun, Orangeburg**

932 Holly Street  
Holly Hill, SC 29059  
Phone: (803) 300-2270  
Fax: (843) 549-6845  
Nights / Weekends: (843) 441-1091

### **MIDLANDS PUBLIC HEALTH REGION**

#### **Kershaw, Lexington, Newberry, Richland**

2000 Hampton Street  
Columbia, SC 29204  
Phone: (803) 576-2749  
Fax: (803) 576-2993  
Nights / Weekends: (888) 801-1046

#### **Chester, Fairfield, Lancaster, York**

PO Box 817  
1833 Pageland Highway  
Lancaster, SC 29720  
Phone: (803) 286-9948  
Fax: (803) 286-5418  
Nights / Weekends: (888) 801-1046

#### **Aiken, Barnwell, Edgefield, Saluda**

222 Beaufort Street, NE  
Aiken, SC 29801  
Phone: (803) 642-1618  
Fax: (803) 643-8386  
Nights / Weekends: (888) 801-1046

### **PEE DEE PUBLIC HEALTH REGION**

#### **Chesterfield, Darlington, Dillon, Florence, Marlboro, Marion**

145 E. Cheves Street  
Florence, SC 29506  
Phone: (843) 661-4830  
Fax: (843) 661-4859  
Nights / Weekends: (843) 915-8845

#### **Clarendon, Lee, Sumter**

PO Box 1628  
105 North Magnolia Street  
Sumter, SC 29150  
Phone: (803) 773-5511  
Fax: (803) 775-9941  
Nights/Weekends: (843) 915-8845

#### **Georgetown, Horry, Williamsburg**

1931 Industrial Park Road  
Conway, SC 29526-5482  
Phone: (843) 915-8804  
Fax: (843) 915-6502  
Nights/Weekends: (843) 915-8845

### **UPSTATE PUBLIC HEALTH REGION**

#### **Anderson, Oconee**

220 McGee Road  
Anderson, SC 29625  
Phone: (864) 260-5801  
Fax: (864) 260-5623  
Nights / Weekends: (866) 298-4442

#### **Abbeville, Greenwood, Laurens, McCormick**

1736 S. Main Street  
Greenwood, SC 29646  
Phone: (864) 227-5947  
Fax: (864) 953-6313  
Nights / Weekends: (866) 298-4442

#### **Cherokee, Greenville, Pickens**

PO Box 2507  
200 University Ridge  
Greenville, SC 29602-2507  
Phone: (864) 372-3133  
Fax: (864) 282-4373  
Nights / Weekends: (866) 298-4442

### **UPSTATE PUBLIC HEALTH REGION**

#### **(continued)**

#### **Spartanburg, Union**

PO Box 2507  
200 University Ridge  
Greenville, SC 29602-2507  
Phone: (864) 372-3133  
Fax: (864) 282-4373  
Nights / Weekends: (866) 298-4442

#### **DHEC Bureau of Disease Control**

#### **Division of Acute Disease Epidemiology**

1751 Calhoun Street  
Box 101106  
Columbia, SC 29211  
Phone: (803) 898-0861  
Fax: (803) 898-0897  
Nights / Weekends: 1-888-847-0902



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